

SUFFOLK COUNTY DEPARTMENT OF LABOR
LIVING WAGE UNIT

GRANT OF EXEMPTION OF LIVING WAGE REQUIREMENTS

Living Wage Law, Suffolk County Code Chapter 347 (2001)

To Be Completed By Living Wage Unit

DATE: _____

APPLICANT NAME: _____ **TELEPHONE #:** _____

ADDRESS: _____

_____ **CONTACT:** _____

AWARDING AGENCY: _____ **AMOUNT:** _____

CONTACT: _____ **FUNDING SOURCE:** _____

BASIS FOR EXEMPTION

CONFLICT WITH STATE OR FEDERAL REGULATIONS _____

SUMMER YOUTH / SCHOOL-TO-WORK EMPLOYER _____

NON-PROFIT ORGANIZATION → HIGHEST WAGE _____

NON-PROFIT ORGANIZATION → ECONOMIC HARDSHIP _____

NON-PROFIT ORGANIZATION → SEASONAL EMPLOYEES _____

DATE EXEMPTION GRANTED: _____

PERIOD OF EXEMPTION: _____

COVERED EMPLOYEES: ALL _____ **OR TITLES:** _____

(Signature of Authorizing Official)

(Date)